## ARIZONA DEPARTMENT OF ECONOMIC SECURITY Employment Administration ◆ Jobs Program

MONTH AND YEAR

JOBS PARTICIPANT'S NAME (Please Print)

OCCUPATIONAL TRAINING REFERRAL (OTR) SIGN-IN/SIGN-OUT RECORD

OTR PROVIDER'S NAME

	SIGN-IN/SIGN-OUT RECORD					RECORD		
Day	Time-In A.M.	Participant's Signature	Time-Out A.M.	Participant's Signature	Time-In P.M.	Participant's Signature	Time-Out P.M.	Participant's Final Signature for the Day
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
24								
25								
26								
27								
28								
29								
30								
31								

## INSTRUCTIONS FOR JA-078-PD OCCUPATIONAL TRAINING REFERRAL (OTR) SIGN-IN/SIGN-OUT RECORD

**A. PURPOSE:** For OTR providers who are private schools or skill centers to record attendance for Jobs

participants enrolled in vocational educational training or skills training, in order to bill the

Jobs Program.

**B. COMPLETION:** The OTR provider will have Jobs participants log in and log out to document hourly/daily

attendance for billing the Jobs Program.

**C. ROUTING:** Original – Provider's records, Copy – Jobs participant's file.

**D. RETENTION:** To be retained:

 By the OTR provider as back-up documentation for monitoring of billings to the Jobs Program for contract services.

2. By the Jobs Program if required for monitoring purposes, for five years or until the resolution of any action involving these records which started before the expiration of the five-year period.

## Equal Opportunity Employer/Program

Under the Americans with Disabilities Act (ADA), the Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service, or activity. For example, this means that if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. This document is available in alternative formats by contacting: This document available in alternative formats by contacting your local Jobs office.